

# CLAIMS ONLY

Application Number

09/14/99 100

Filing Date

12/21/99

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep		Depend		Indep		Depend	
1							51							
2							52							
3							53							
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44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
Total Indep	6		5		5		Total Indep							
Total Depend	15		13		13		Total Depend							
Total Claims	21		18		18		Total Claims							